FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

| OMB APPR | ROVAL |
|---------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average I | ourden |
| hours per response. | 0.5 |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Print or Ty | pe Response | s) | | | | | | | | | | | - | | | | | |
|--------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------|----------------------|------------------------------------------|-----------------------------------------------------------------|--------------------------------------------------------------|-----------------------------------|-------------------------------------------------------------------------------------------------------|----------------|-----------------------------------|------------------------------------------------------------------|------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|--------------|------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------|
| 1. Name and Address of Reporting Person * COLA MICHAEL F | | | | | 2. Issuer Name and Ticker or Trading Symbol Cerecor Inc. [CERC] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director | | | | | |
| (Last) (First) (Middle) C/O AEVI GENOMIC MEDICINE, LLC, 435 DEVON PARK DRIVE, SUITE 715 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/03/2020 | | | | | | | | X Officer (give title below) Other (specify below) Chief Executive Officer | | | | | |
| (Street) WAYNE, PA 19087 | | | | 4. If . | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person | | | | | |
| (Ci | ity) | (State) | | (Zip) | | | | Table | I - Non | -Der | ivative | Securiti | ies Acquir | ed, Disposed of | , or Benefic | cially Owned | | |
| 1.Title of Security (Instr. 3) | | | Da | 2. Transaction Date (Month/Day/Yea | | ıy | emed on Date, if /Day/Year) | (Instr. 8) | | (. | 4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5) | | of (D) C | 5. Amount of Securities Beneficially Dwned Following Reported Fransaction(s) Instr. 3 and 4) | | 6. Ownership Form: Direct (D) | Beneficial Ownership | |
| | | | | | | | | Со | de | V A | Amount | (A) or (D) | Price | | | | or Indirect (Instr. 4) (I) (Instr. 4) | |
| Common | n Stock | | 02 | 2/03/2020 | \perp | | | Α | ١ | 7 | 75,746 | A | <u>(1)</u> 7 | 5,746 | | | D | |
| 1. Title of Derivative Conversi Security (Instr. 3) Price of Derivativ Security | | n Date (Month/Day/Year) Ex an (M | | A. Deemed 4 xecution Date, if T | | (e.g., puts, calls, 5. Num Transaction Derivat Code Securiti | | tites Acquired, Disp varrants, options, co er of 6. Date Ex Expiration (Month/Date of (D) | | Dispo s, con Exec tion I | onvertible securion ercisable and Date | | eficially Ovities) 7. Title ar | vned ad Amount of ag Securities | | f 9. Number or e Derivative Securities Beneficially Owned Following Reported | f 10. Ownersh Form of Derivati Security Direct (I or Indire | Benefici Ownersh y: (Instr. 4) |
| | | | | | Code | V | (A) | (D) | Date Exerci | sable | Expira Date | tion | Title | Amount or Number of Shares | | Transaction (Instr. 4) | | 1) |
| Stock Option (Right to Buy) | \$ 3.98 | 02/03/2020 | | | A | | 1,200,00 | 0 | C | <u>2)</u> | 02/03 | 3/2030 | Commo Stock | n 1,200,000 | \$ 0 | 1,200,00 | D D | |
| Repor | ting O | wners | | | | | | | | | | | | | | | | |
| | | | | Relationships | | | | | ı | | | | | | | | | |
| Reporting Owner Name / Address Director | | 1 Director | 10% Owner Officer | | | | | | Other | | | | | | | | | |
| COLA MICHAEL F C/O AEVI GENOMIC MEDICINE, LLC 435 DEVON PARK DRIVE, SUITE 715 WAYNE, PA 19087 | | | X | | Chief Executive Office | | | | ficer | | | | | | | | | |

Signatures

| /s/ Michael McInaw, by Power of Attorney | 02/05/2020 |
|------------------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Received in exchange for 2,267,859 shares of Aevi Genomic Medicine, Inc. ("Aevi") common stock in connection with the merger of Aevi into a wholly owned subsidiary of the issuer pursuant to the previously announced Agreement and Plan of Merger and Reorganization by and among Aevi, Genie Merger Sub, Inc., Second Merger Sub, LLC and the issuer.
- (2) The stock option will vest over four years, with the first 25% vesting on the first anniversary of the grant date, and the remainder vesting in equal monthly installments, subject to the reporting person's continued service on each such vesting date.

| Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number. | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |